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|---|----------------------------------|---|--------------------------|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)<br/>FY 2009</b><br><i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H. R. 4818).)</i>  |                                  | Docket Number (Optional)<br>13111-00038-US1 |                          |
| Application Number<br>10/576,282-Conf. #1949  |                                  | Filed<br>April 19, 2006                     |                          |
| For <b>STABILIZATION OF HYDROFORMYLATION CATALYSTS BASED ON PHOSPHORAMIDE LIGANDS</b>   |                                  |   |                          |
| Art Unit<br>1626  |                                  | Examiner<br>J. M. Nolan                     |                          |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  |                                  |   |                          |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):   |                                  |   |                          |
| <input type="checkbox"/>  | One month (37 CFR 1.17(a)(1))    | Fee<br>\$130                                | Small Entity Fee<br>\$65 |
| <input checked="" type="checkbox"/>   | Two months (37 CFR 1.17(a)(2))   | \$490                                       | \$245                    |
| <input type="checkbox"/>  | Three months (37 CFR 1.17(a)(3)) | \$1110                                      | \$555                    |
| <input type="checkbox"/>  | Four months (37 CFR 1.17(a)(4))  | \$1730                                      | \$865                    |
| <input type="checkbox"/>  | Five months (37 CFR 1.17(a)(5))  | \$2350                                      | \$1175                   |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.<br><input type="checkbox"/> A check in the amount of the fee is enclosed.<br><input checked="" type="checkbox"/> Payment by credit card.<br><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.<br><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-2775</u> . |                                  |   |                          |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  |                                  |   |                          |
| I am the <input type="checkbox"/> applicant/inventor.   |                                  |   |                          |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).   |                                  |   |                          |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>62,324</u>  |                                  |   |                          |
| <input type="checkbox"/> attorney or agent under 37 CFR 1.34.<br>Registration number if acting under 37 CFR 1.34 _____  |                                  |   |                          |
| <u>/Georg M. Hasselmann/</u><br>Signature   |                                  | <u>November 10, 2008</u><br>Date            |                          |
| <u>Georg M. Hasselmann</u><br>Typed or printed name   |                                  | <u>(202) 331-7111</u><br>Telephone Number   |                          |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.   |                                  |   |                          |
| <input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.  |                                  |   |                          |